US Department of Labor Standards Washington DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No 1215-0188 Expires 11 30-2006

This report is mandatory under P L. 88-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440

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	For Official Use Only
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3 Name and address of person filing

MICHAEL TUCKER

1 File Number U

Name

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

2 Fiscal Year Covered From

01/01/2005Through 12/31/2005

4 Name file number and address of labor organization

Name MICHAEL TUCKER  PO Box Bldg Room No If any  C/O MAJOR LEAGUE BASEBALL PLAYERS A  Street 12 E. 49 <sup>TH</sup> STREET  24 <sup>TH</sup> FLOOR  City NEW YORIC	Street 12 E. 49TH STREET  City NEW YORK					
State NY ZIP Code + 4 10017	State NY ZIP Code + 4 10017					
5 Position in labor organization PLAYER REPRESENTATIVE						
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)						
A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent						
6 Name and address of Employer (including trade name if any)	7 a. Nature of Interest Transaction or Income					
Name						
Trade Name if any						
PO Box, Bldg Room No If any						
Street	7 b. Amount.					
City						
State ZIP Code + 4						
Signature						

15 Signature and verification. The undersigned declares under penalty of Penury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned a knowledge and belief true correct, and complete (See the section on penalties in the instructions)

Telephone Number

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested 8 Name and address of Business (including trade name if any) 9 Business deals with Name NIKE, INC. a Labor Organization Trade Name if any b Trust PO Box Bldg Room No If any c Employer ONE BOWERMAN DRIVE City BEAVERTON **State** ZIP Code + 4 DR 11 a Nature of such dealing 10 If 9 b or 9 c is checked give trust or employer's name Name MLBPA LICENSEE Trade Name if any PO Box Bldg Room No if any Street 11 b Approximate dollar value of such dealing City 12 a Nature of interest held or income received State ZIP Code + 4 PRODUCT ENDORSEMENT C Received from any employer (other than an employer covered under parts A and B above)

or from any labor relations consultant to an employer any payment of money or other thing of value				
13 a Name and address of Employer or Labor Relations Const (including trade name if any)	litant	14 a Nature of payment		
Name				
Trade Name if any				
PO Box Bldg Room No If any				
Street				
City				
State ZIP Code + 4				
13 b is the Business an Employer or Consultant	?	14 b Amount of payment		

B, Heid an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested 8 Name and address of Business (including trade name if any) 9 Business deals with TOPPS COMPANY, INC. Name a Labor Organization Trade Name if any PO Box Bldg Room No If any c Employer ONE WHITEHALL STREET Street NEW YORK City ZIP Code + 4 State 11 a Nature of such dealing 10 If 9 b or 9 c is checked give trust or employer's name Name MLBPA LICENSEE Trade Name if any PO Box Bldg Room No if any Street 11 b Approximate dollar value of such dealing #4257578City 12 a Nature of interest held or income received State ZIP Code + 4 PRODUCT ENDORSEMENT 12 b Amount.

or from any labor relations consultant to	an employer any payment or	money	or other thing of value
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)			14 a Nature of payment
Name			
Trade Name if any			
PO Box Bldg Room No If any			
Street			
Crty			
State	ZIP Code + 4		
13 b is the Business an Employer	or Consultant	}	14 b Amount of payment.

C Received from any employer (other than an employer covered under parts A and B above)

## NAME OF PERSON FILING - Michael Tucker (File Number U-10604)

## ADDENDUM TO LM 30

In 2005, I received endorsement income from three businesses that, insofar as I know, do not do business with the MLBPA, but that may do business with one or more Major League Baseball Clubs and/or with Major League Baseball I do not know whether any of these businesses have such extensive commercial dealings with the Clubs and/or with Major League Baseball that those commercial dealings represent a "substantial part" of their overall business operations Accordingly, in a good faith effort to fully meet (and perhaps go beyond) my reporting obligation, I am stating below the amount of endorsement income I received from each of these businesses in 2005

Wilson Sporting Goods \$1,902 Franklin Gloves \$6,667